

Elect four new Regents

Four surgeons were elected Wednesday to the Board of Regents of the American College of Surgeons. The election took place at the adjourned meeting of the College's Board of Governors, and was announced yesterday at the annual meeting of the Fellows.

The four are Frank Hinman, Jr., San Francisco; William H. Muller, Jr., Charlottesville, Virginia; Joseph H. Pratt, Rochester, Minn., and G. Tom Shires, Dallas, Texas.

Dr. Hinman, a 1941 graduate of Johns Hopkins University and a Fellow of the College since 1950, is clinical professor of urology at the University of California School of Medicine, San Francisco, and chief of the department of urology at both Children's Hospital, San Francisco, and San Francisco Hospitals.

Dr. Muller is Stephen H. Watts professor of surgery and chairman of the department of surgery at the University of Virginia School of Medicine, Charlottesville. He is a 1943 graduate

(Continued on Page 2)

John M. Beal (left) chairman, ACS Committee on Medical Motion Pictures, watches approvingly as Charles T. Riall, manager of professional relations, Davis & Geck, Department of Lederle Laboratories, Division of American Cyanamid Company, presents a symbolic plaque to ACS President Howard Mahorner honoring the surgeons who produced 18 Cine Clinic film for release in 1971. At right is William P. Longmire, Jr., Chairman, Board of Regents, and president-elect, who complimented Davis & Geck for cooperating with the College on the Cine Clinic program. More than 350 films have been produced and distributed for use in residency training programs and postgraduate education.



Longmire is president-elect; Schwartz, Beacham vp's

William F. Longmire, Jr., Los Angeles, was chosen yesterday as president-elect of the American College of Surgeons.

Two other College officers-elect were also named at the annual meeting of the Fellows. Henry G. Schwartz, St. Louis, was voted first vice president-elect and Woodward D. Beacham, New Orleans, second vice president-elect.

Dr. Longmire, a 1938 graduate of Johns Hopkins University School of Medicine, is professor of surgery and chairman of the department of surgery at the University of California School of Medicine, Los Angeles. A Fellow since 1946, he has been a member of the Board of Regents — the College's policy-making body — since 1962, its vice chairman from 1967 to 1969, and chairman since 1969.

Dr. Schwartz, a 1932 graduate of Johns Hopkins University School of Medicine, St. Louis, has been a Fellow since 1946.

Dr. Beacham, 1935 graduate of Tulane University, New Orleans, has held College membership since 1943.



DR. LONGMIRE

Son of First President

George G. Finney receives Distinguished Service Award

A noted Baltimore surgeon, George G. Finney, son of the first President of the American College of Surgeons, received the 1971 Distinguished Service Award of the College yesterday.

The award was presented by the President of the College, Howard Mahorner, at the annual meeting of Fellows.

The '71 recipient is one of three sons of the first College President, John M. T. Finney, (1913-16). His brother, John M. T. Finney, Jr., and their nephew, Daniel C. W. Finney, both of Baltimore, are also Fellows of the American College of Surgeons. The third son, Eben, is an architect and father of Daniel.

Dr. George G. Finney, who was graduated from Princeton in 1921 and received his MD degree from the John Hopkins University School of Medicine

in 1925, was admitted to Fellowship in 1940.

Before presenting the Distinguished Service Award and reading the Citation, Dr. Mahorner paid tribute to Dr. Finney for his long and dedicated service in surgery as well as his service in civic affairs.

"It is the fortunate lot of certain men to have inculcated from birth a tradition of public service," he said, adding: "Steeped in such a tradition, and dedicated to extending it over a medical career verging on half a century, George G. Finney has exemplified for thousands of his patients, colleagues, and friends,

(Continued on Page 6)

Handler:

Man now responsible for shaping his own destiny

The president of the nation's most influential science organization said yesterday that the time is fast approaching when society must decide whether or not to allow genetically defective babies to be born.

Dr. Philip Handler, president of National Academy of Sciences, in delivering the Martin Memorial lecture Thursday afternoon, said that the future of the human species could be threatened if something isn't eventually done to prevent the continued deterioration of the gene pool, which is what determines future generations.

Medical science, he said, is keeping alive many people who in past generations would have died, and they in turn are giving birth to more babies who are defective.

"In the past," he said, "this was a major problem, but now it has all the earmarks of becoming a major one. Though medical science must bear the brunt of the decision, the public must confront this problem, and decide what to do.

He said that the needs of the species may have to take precedence over the rights of the individual, and that the hypocritical oath, which says that the physician's responsibility is only to his patient, may have to be reconsidered accordingly.

More than 115 diseases are inherited. Fortunately, with the exception of diabetes and gout, these diseases ac-

count for only a small percentage of the diseases of mankind. But the number of afflicted people are growing. Dr. Handler said he does not suggest that diabetics, for instance, should stop having babies out of consideration for the species; but he would give such advice to those people with the more devastating hereditary diseases.

Dr. Handler said he didn't know what the answer was, though he thought it would lie somewhere with genetic counseling, and fetal tests to determine which babies will be born with defects so that abortions could be performed.

One such test, amniocentesis (in which samples of fluid are taken from the sack containing the fetus) is in wide use, and it is effective in predicting a variety of congenital problems such as mongolism.

Dr. Handler said that the difficult philosophical question of what constitutes human life seems to be in the process of being resolved in favor of the belief that in the first few months of gestation the fetus is more an extension of the mother than a separate human being.

Accordingly, abortion is being much more accepted. This having been done, the rest will be easier, he said.

Man is no longer a creature shaped by the forces of nature through the process of natural selection because he now controls or compensates for these forces.

In effect, Dr. Handler said, man is now responsible for shaping his own evolution and he must accept this fact, and try to shape future generations beneficially, not destructively.

Shown here during a meeting of the advisory committee to the Organ Transplant Registry, are, left to right, Thomas E. Starzl, Frederick K. Merkel, C. Rollins Hanlon, John J. Bergan and David M. Hume. The meeting was held Wednesday afternoon. The registry is jointly operated by the American College of Surgeons and National Institutes of Health.



Friday's program

Things like this do not happen . . . but it did. For the convenience of those persons who did not receive an official program, the Clinical Congress News reprints here all sessions scheduled for today.

The exception being the final session of those postgraduate courses already begun.

Registration facts

As of 5:00 p.m. Thursday

The doubting Thomases who were doubting not too long ago that, for whatever the reasons, attendance would not be up to normal this year . . . were wrong. As the figures below tell, attendance at this year's Congress surpassed that of the 56th Clinical Congress held in Chicago last year. As of Thursday evening, in Chicago, 9,525 doctors had registered as compared to 9,708 this year. Total figures are 14,907 for Chicago, 15,266 for Atlantic City.

Doctors	9,708
Ladies	2,699
Industrial exhibitors	2,291
Visitors	302
Press and staff	266
Total	15,266

Elect four new Regents

(Continued from Page 1)

of Duke University and has been a Fellow since 1952.

Dr. Pratt, who is a 1937 graduate of Harvard University, is professor of clinical surgery at the Mayo Graduate School of Medicine, University of Minnesota, and head of the surgical section at the Mayo Clinic, Rochester. He has been a Fellow since 1948, and is a board-certified obstetrician-gynecologist.

Dr. G. Tom Shires is professor of surgery and chairman of the department at Southwestern University Medical College, Dallas. He is a 1948 graduate of Southwestern, and has been a Fellow since 1959.

The four new Regents replace Regents whose terms expired in 1971. They are: John I. Brewer, Chicago; William F. Longmire, Jr., Los Angeles; Harry M. Spence, Dallas, and Robert M. Zollinger, Columbus, Ohio.

The Board of Regents is the policy-making body of the American College of Surgeons. The Board has 19 members, including the College President.

Messages

348-7930, 31, 32, 33

Medical care

(Atlantic City Hospital)

344-2254, ext. 229.

General Sessions in Surgery

9:00 am—12 noon

Symposium

What's New in Surgery

Convention Hall—Ballroom

Presiding:

David C. Sabiston, Jr., MD, FACS, *Durham*

Shock and Metabolism

Arthur E. Baue, MD, FACS, *St. Louis*

Otorhinolaryngology

Douglas P. Bryce, MD, FACS, *Toronto*

Cardio-thoracic Surgery

Vincent L. Gott, MD, FACS, *Baltimore*

Plastic Surgery and Burns

William L. White, MD, FACS, *Pittsburgh*

Neurological Surgery

R. M. Peardon Donaghy, MD, FACS, *Burlington, Vt.*

Gastrointestinal Biliary Conditions

Theodore Drapanas, MD, FACS, *New Orleans*

Orthopedic Surgery

Lee R. Straub, MD, FACS, *New York*

Tumors

Charles F. McKhann, MD, FACS, *Minneapolis*

Urology

Robert K. Rhamy, MD, FACS, *Nashville*

Gynecology and Obstetrics

Vincent G. Stenger, MD, FACS, *Hershey*

Transplantation

Charles F. Zukoski III, MD, FACS, *Tucson*

Sessions in the Surgical Specialties

Proctology

8:30—10:00 am

Panel Discussion

Treatment of Hemorrhoidal Disease

Convention Hall—Rooms F and G

Moderator:

Matthew A. Larkin, MD, FACS, *Miami*

Closed Method

James P. Muldoon, MD, FACS, *Grand Rapids*

Conventional and Extended Hemorrhoidectomy

John R. Hill, MD, FACS, *Rochester, Minnesota*

Injection Method

Robert V. Terrell, MD, FACS, *Richmond*

Rubber Band Ligation Method

Eugene P. Salvati, MD, FACS, *Plainfield, New Jersey*

10:30 am—12 noon

Panel Discussion

Surgical Management of Diverticular Disease of the Colon

Convention Hall—Rooms F and G

Moderator:

J. Edwin Alford, MD, FACS, *Buffalo*

Pathogenesis

William H. Dickson, MD, FACS, *Washington, DC*

Acute

Malcolm C. Veidenheimer, MD, FACS, *Boston*

Chronic

William C. Beck, MD, FACS, *Sayre, Pennsylvania*

Hemorrhage

Russell R. Klein, MD, FACS, *San Rafael, California*

1:30—3:00 pm

Panel Discussion

Management of Pain in Recurrent Colo-rectal Carcinoma

Convention Hall—Ballroom

Moderator:

Maus W. Stearns, Jr., MD, FACS, *New York*

Surgical Treatment

Stanley M. Goldberg, MD, FACS, *Minneapolis*

Chemotherapy

Fred Joseph Ansfield, MD, *Madison, Wisconsin*

Neuro-Surgical Intervention

Joseph A. Epstein, MD, FACS, *New Hyde Park, New York*

Radiation Therapy

Walter T. Murphy, MD, *Buffalo*

3:30—5:00 pm

Panel Discussion

Treatment of Prolapse and Proctidentia

Convention Hall—Ballroom

Moderator:

Alejandro F. Castro, MD, FACS, *Washington, DC*

Panelists:

Charles B. Ripstein, MD, FACS, *Great Neck, New York*

Norman D. Nigro, MD, FACS, *Detroit*

Harry E. Bacon, MD, FACS, *Philadelphia*

Malcolm Douglas MacLean, MD, *Bethpage, New York*

Thoracic Surgery

1:30—3:00 pm

Panel Discussion

Carcinoma of the Lung: Newer Diagnostic Procedures and Treatment

Holiday Inn

Moderator:

William E. Neville, MD, FACS, *Newark, NJ*

Panelists:

Edward J. Beattie, Jr., MD, FACS, *New York*

Hiram T. Langston, MD, FACS, *Chicago*

Philip E. Bernatz, MD, FACS, *Rochester, Minnesota*

Thomas B. Ferguson, MD, FACS, *St. Louis*

3:30—5:00 pm

Panel Discussion

Circulatory Support: Devices and Drugs

Holiday Inn

Moderator:

John E. Connolly, MD, FACS, *Irvine, California*

Panelists:

John Hines Kennedy, MD, FACS, *Houston*

C. Walton Lillehei, MD, FACS, *New York*

Han Zwart, MD, *Salt Lake City*

The Postgraduate Courses

Neurologic Surgery—Surgical Aspects of Stroke

6 Hours—2 sessions (Fri.)

Chairman:

Thomas W. Langfitt, MD, FACS, *Philadelphia*

Session I

Friday, October 22

8:30—11:30 am

Dennis Hotel—St. Denis Room

Moderator:

Thomas W. Langfitt, MD, FACS, *Philadelphia*

Cerebral Hemodynamics in Occlusive Disease

B. Watson Brawley, MD, *Richmond*

Transient Ischemic Attacks: Embolus vs. Insufficiency

John S. Meyer, MD, *Houston*

Clinical Diagnosis of Extracranial Occlusive Disease

George T. Tindall, MD, FACS, *Galveston*

Angiography

Herbert I. Goldberg, MD, *Philadelphia*

Emergency Management of the Acutely Ill Stroke Patient

John F. Mullan, MD, FACS, *Chicago*

Session II

Friday, October 22

1:30—4:30 pm

Dennis Hotel—St. Denis Room

Moderator:

E. S. Gurdjian, MD, FACS, *Detroit*

Indications for Surgery

Thoralf M. Sundt, Jr., MD, FACS, *Rochester, Minnesota*

Surgery for Carotid Stenosis and Intra-operative Monitoring

James W. Correll, MD, FACS, *New York*

Results of Carotid Endarterectomy

Roy H. Clauss, MD, FACS, *New York*

Anticoagulation

Clark H. Millikan, MD, *Rochester, Minnesota*

Intracranial Reconstructive Surgery

R. M. Peardon Donaghy, MD, FACS, *Burlington, Vermont*

The Motion Picture Exhibition

General Session

Friday, October 22

8:30 am—12 noon

Convention Hall—Room 102

Presiding officer and coordinator:

Carl Davis, Jr., MD, FACS, *Chicago*

Panelists:

Edward J. Beattie, Jr., MD, FACS, *New York*

Frederic A. de Peyster, MD, FACS, *Chicago*

John R. Orndorff, MD, FACS, *Des Plaines, Ill.*

Modified Radical Mastectomy

Hugh Auchincloss, MD, FACS, *Ridgewood, NJ*

Thoracoabdominal Removal of Wilms' Tumor

W. Hardy Hendren, MD, FACS, *Boston*

Colon Interposition after Laryngopharyngeal Resection

Jose J. Terz, MD, FACS, *Richmond*

Walter Lawrence, Jr., MD, FACS, *Richmond*

Jejunal Transposition for Postgastrectomy Disorders

LeRoy H. Stahlgren, MD, FACS, *Philadelphia*

Tracheal Resection for Benign Tracheal Stenosis

Tom R. De Meester, Maj., MC USA, MD, *Baltimore*

George D. Zuidema, MD, FACS, *Baltimore*

Surgical Treatment of Ureteral Trauma

C. Eugene Carlton, Jr., MD, FACS, *Houston*

Russell Scott, Jr., MD, FACS, *Houston*

The Repair of Incisional and Inguinal Hernias

Francis C. Usher, MD, FACS, *Houston*

Delayed Rupture of the Diaphragm After Blunt Trauma

Gerald M. Lemole, MD, *Philadelphia*

Willis P. Maier, MD, FACS, *Philadelphia*

George P. Rosemond, MD, FACS, *Philadelphia*

Telecasts of Surgical Procedures

8:30—10:00 am

Pulmonary Procedure

Convention Hall—Room 103

Surgeon: Herbert E. Cohn, MD, FACS, *Philadelphia*

Moderator: William S. Blakemore, MD, FACS, *Philadelphia*

Panelists: David B. Skinner, MD, FACS, *Baltimore*

Russel M. Nelson, MD, FACS, *Salt Lake City*

Henry J. Heimlich, MD, FACS, *Cincinnati*

10:15 am—12 noon

Reduction Mammoplasty

Convention Hall—Room 103

Surgeon: José Castillo, MD, FACS, *Philadelphia*

Moderator: Francis X. Paletta, MD, FACS, *St. Louis*

Panelists: Richard B. Stark, MD, FACS, *New York*

Thomas D. Cronin, MD, FACS, *Houston*

Franklin L. Ashley, MD, FACS, *Los Angeles*

Rhoads: national policy and programs can be designed to improve care

Jonathan E. Rhoads, 52nd president of the American College of Surgeons, said last night he is convinced that "a national health policy and national health programs can be designed to improve the care of the surgical patient." He prefers a system with several options for both patients and physicians.

The distinguished Philadelphia surgeon told his colleagues in his presidential address that "a single monolithic nationwide plan of medical care could threaten certain freedoms of American physicians to provide the best surgical care to their patients."

He said that "the doctors' freedoms are indissolubly associated with the patients' freedoms."

"Doctors today," he said, "fear loss of freedom to serve their patients in the way that seems best for them, loss of freedom to improvise when the routine methods of care do not meet the problems, and loss of freedom in teaching and research."

"The patients' freedoms," he added, should include choice of physicians, not only at the primary level but at all levels, the right to choice of hospital, the right to a system in which he is not only guaranteed the essentials of excellent health care, but is free to add to this by supplemental payments of his own funds for greater frequency of examinations, less waiting time, a single room, or other things he wants, even though they are not medically essential."

Dr. Rhoads, who is John Rhea Barton professor of surgery and chairman of the Department of Surgery at the School of Medicine, University of Pennsylvania and also director of the Harrison Department of Surgical Research there, listed a "number of obvious problems" related to the so-called high-cost of health care today.

"In relation to the high cost," he said, "one must list:

"—The short supply of physicians.

"—The difficulty of drawing adequate numbers of people into the medical profession.

"—The duplication of highly specialized facilities among competing hospitals.

"—The reluctance of medical organizations to make good use of auxiliary personnel.

"—The influence of the risk of malpractice suits on the cost of medical care."

Then Dr. Rhoads listed other problems: "unwillingness of physicians to serve in remote areas and unsafe areas in city districts, the overemphasis on curative medicine, the underemphasis on preventive medicine, and the underemphasis on early diagnosis."

He stressed the importance of public education in health services.

"As medicine becomes more preventive — and surgery is increasingly shown to be dependent for its success on early diagnosis — public education becomes critical," he said. "Without successful school systems and a substantially increased health content in the curriculum, thousands of people will fail to utilize even the best, the closest and the freest of health services. This educational process must be continued as people age. Continuing education is essential for the physician; it is equally important for the patient."

"The more I have pondered the question of what our proper role in guiding federal legislation is, the more I come back to our (College) own declared objective: the improvement of the care of the surgical patient. I believe that if the role of this College in advising those in government is aimed at this — our basic objective — we can be of maximum benefit to our fellow citizens and to their elected representatives."

CLINICAL CONGRESS NEWS, Vol 22,
No. 5. Published daily, Oct. 18-22, 1971
by the American College of Surgeons
OFFICE:
Room 21, Dennis Hotel, Atlantic City
Phone: 348-6414.
EDITOR:
Gordon L. Briggs

Elect new members to Board of Governors executive committee

The Board of Governors recently elected to its executive committee three new officers and two new members.

Elected Wednesday were Bentley P. Colcock, Boston, who is associate clinical professor of surgery at Boston University School of Medicine. Dr. Colcock was elected chairman of the executive committee. Robert C. Hickey, Houston, director of the University of Texas M.D. Anderson Hospital and Tumor Institute, was elected secretary, and Harrison R. Wesson, Montclair, New Jersey, treasurer. Dr. Wesson is attending surgeon at Mountain-sire Hospital in Montclair, and consultant to the Essex County Overbrook Hospital, in Cedar Grove.

Luis F. Sala, chairman of the department of surgery at the Hospital Santa Asilo De Damas in Ponce, Puerto Rico, was elected to fill the unexpired term of Dr. Wesson on the executive committee. Howard Ulfelder, Boston, was re-elected as a member of the executive committee.

The Board of Governors represents Fellows in states and communities, and in surgical and other scientific organizations. The Board advises Regents on College policy, and elects members of the Board of Regents.

Today's TV surgeons are Cohn & Castillo

Today's two live television transmittals of surgical procedures will conclude the television program at this year's Congress. The operations being performed at the Thomas Jefferson University Hospital in Philadelphia will begin at 8:30 a.m. in Room 103 of Convention Hall.

Herbert E. Cohn, Philadelphia, will perform a pulmonary procedure at 8:30 a.m. The moderator will be William S. Blakemore.

The final telecast, beginning at 10:15 a.m., is reduction mamoplasty performed by Jose Castillo, Philadelphia. Francis X. Paletta, St. Louis, will moderate.

Today's motion pictures

Only one motion picture session will be presented today, a General Session, beginning at 8:30 a.m. in Room 102 of Convention Hall. Eight films will be included.

Forum Highlights

Synopses of some of the papers presented during recent sessions of the Forum on Fundamental Surgical Problems.

Blood volume and septicemic shock

A study on 43 patients by investigators from the University of Pennsylvania confirms the view that expanding the volume of blood is the primary treatment for shock arising from bacteria in the blood stream (septicemic shock). In their report, the investigators said the mortality rate for the 43 patients given blood or plasma was 23 percent, compared with 58 percent for the overall hospital mortality.

Volume expansion and use of digitalis corrected the low blood pressure (hypertension) and scanty urine (oliguria) without the addition of drugs or of corticosteroids in 20 of the 50 shock episodes. Another 24 episodes were treated with isoproterenol, a nerve-stimulating drug which has been used experimentally in shock. In other cases, they used metaraminol, a drug which causes constriction of blood vessels, increased blood pressure and improved kidney function. Use of a vacopressor such as mataraminol is contrary to current accepted therapy, the authors said.

The study was conducted by Harvey J. Sugerman, M.D., Joseph F. Diaco, M.D., Thomas W. Pollock, M.D., and Leonard D. Miller of the Harrison Department of Surgical Research.

Cell Vaccine

A vaccine made from the patient's own cells has elevated the cure rate of bone cancer from 17 percent to 40 percent in a small series of patients. The 40 percent survival was found in the treated group (15 cases) and the 17 percent survival among 145 cases in the control group treated conventionally over a several-year period. Only those under age 25 were evaluated. Of the 15 patients in the treated group, seven are free of disease, three of them for over five years.

Ralph C. Marcove, M.D., chief of the bone tumor service, Hospital for Special Surgery, New York, said active immunization was first undertaken in 1963. "As far as we know, this was the first such attempt of this method of treatment," he said.

What were the ladies doing while their men were attending the largest—in terms of both attendance and program—Clinical Congress ever held in Atlantic City? In this case listening . . . to a lecture on stocks and various other financial topics. This event was held in Atlantic City; on other days the ladies' travels took them to two other states, Pennsylvania and Delaware.



Since April, 1966, it was decided to treat only disease-free patients just after amputation of the affected limb. Two series of vaccines were prepared. One was a cell homogenate and the other was a whole cell preparation. There was a 42 percent success rate using a cell homogenate but a one-in-14 success rate on using whole cell preparation. The second method of treatment was discontinued. Once a metastasis to the lung occurred it was considered a failure in the use of this vaccine.

"The oldest survivors are now five years since the homogenate vaccine was given and the results seem encouraging to allow for this preliminary report," said Dr. Marcove. Associated as co-authors are Chester M. Southam, M.D., Arthur G. Levin, M.D., Ch.B., Valerie Mike, Ph.D., and Andrew Huvos, M.D.

Laryngeal Cancer

A 35 year study of cancer of the larynx (voice box) treated at the University of Chicago has shown that the earliest cases are 95 percent curable by means of radiation and/or surgery,

according to a paper presented by Louis D. Lowry, M.D., James E. Marks, M.D., and William J. Powell, M.D.

The study covered 260 laryngeal cancers. In most cases the patient was a smoker. Of the 186 smokers on whom data is available, 52 smoked less than a pack a day, 107 smoked one or two packs a day, and 27 smoked more than two packs a day. Average duration of smoking was 31.2 years. Hoarseness was the predominant symptom.

Of the five-year cures of laryngeal cancer, 23 were achieved through salvage surgery and two by radiation.

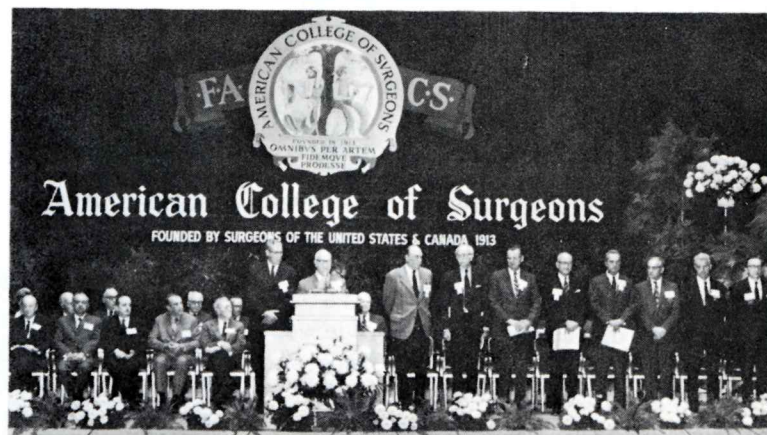
"It was found that the patients needed to be followed very closely during the first five years for possible recurrence or the appearance of a new cancer," said Dr. Lowry. "With close follow-up, the patients who were found to have a new cancer were cured in many instances."

Total hip prostheses

Development of better wear-resisting materials may make possible the use of total hip prostheses in younger patients. Because there is uncertainty

(Continued on Page 6)

While the 57th annual Clinical Congress concludes this afternoon, can you remember back a mere 96 hours ago, when ACS President Howard Mahorner introduced dignitaries from the stage in the Ballroom of Convention Hall.



Distinguished Service Award

(Continued from Page 1)

the highest ideals of selfless devotion to the well-being of his fellow man.

"Distinguished son of a distinguished father, who graced the initial Presidential chair of this College, George Finney has kept alive and glowing the Finney tradition of service to his patients, his College and his country. A leader in civic and community affairs, he was similarly valiant and meritorious in his service as Chief Surgeon of a general hospital during the war in the South Pacific, receiving the Bronze Star Medal and the Legion of Merit for his extraordinary conduct.

"His long and devoted service to the American College of Surgeons was crowned by his Chairmanship of the Board of Governors and is particularized in the text of the award."

From 1926 to 1929, Dr. Finney served as assistant resident surgeon at John Hopkins Hospital, and from 1929 to 1930, he served there as resident surgeon. Over the years, he held positions of assistant, instructor and associate in surgery at the same institution.

In addition, he served as chief of the surgical staff at Provident Hospital and on the visiting staff at Union Memorial Hospital, the Hospital for Women in Maryland, and the Church Home and Infirmary, all in Baltimore. His practice was limited to general surgery and thoracic surgery.

During World War II, Dr. Finney advanced from first lieutenant to colonel, USA, serving in the Pacific theatre from 1942 to 1945, then as consultant to the surgeon general, 1947 to 1962.

Dr. Finney, in 1965, was elected Chairman of the Board of Governors of the College. He is a member of numerous medical and surgical societies, and has contributed extensively to the medical literature.

He was married to the former Josephine L. Stewart, Sept. 20, 1924, and they have three sons and a daughter.

The last time the Award was presented was in 1969 when it was bestowed on Randolph Lee Clark, president and professor of surgery at the University of Texas M. D. Anderson Hospital and Tumor Institute, Houston. Since 1957, 14 awards have been presented, including the one this year.

Ladies' program committee has reasons for pride

The chairman for this year's Ladies' Entertainment Committee was Mrs. Morton A. Rosenblatt. Mrs. James H. Mason, IV, assisted as vice-chairman. Others who helped make Ladies' Entertainment successful and interesting were: Mrs. Alfred Alessi, Mrs. Herbert D. Axilrod, Mrs. Donald R. Cooper, Mrs. Alfred S. Fobese, Mrs. Paul Nemir, Jr., Mrs. George Robb, Mrs. Harry Subin, Mrs. Harrison R. Weson, and Mrs. Charles C. Wolferth, Jr.

Forum highlights

(Continued from Page 5)

as to how long the present prostheses will function, the operation is usually reserved for patients over 60 years of age.

Jorge O. Galante, M.D., and William Rostoker, Ph.D., of the University of Illinois orthopedic surgery and materials engineering departments, respectively, designed a wear tester to evaluate the wear and friction in a variety of articulating surfaces. These included ceramic on ceramic, ceramic on metal, metal on metal, polymer on ceramic, polymer on metal, and polymer on polymer.

In the report Dr. Galante said a polymer, RCH 1000, showed the lowest wear rate among the commercially available material but that a newer material, using filled polymers, exhibited a wear rate ten times lower than the materials currently in use.

Complete papers on these and all other Forum topics are printed in *Surgical Forum, Vol. XXII*, which can be purchased for \$4.00 per copy in the lobby of Convention Hall.



At the President's dinner held Wednesday evening, both the President-elect and the President of the College were caught by the ever-present photographer. In the photo above, Dr. and Mrs. William P. Longmire, couple at right, pass through the receiving line; the couple on the left is Dr. and Mrs. Hectof Nadal, San Juan. Below, Dr. and Mrs. Howard Mahorner greet Dr. and Mrs. Morton Rosenblatt.



Nearly 90 members of the press covered this year's Clinical Congress, including one reporter from West Germany. The publicity department of the College arranged more than 30 press conferences during the Congress, at which participants met with reporters for free-wheeling question and answer periods.

SESAP a success

More than 2,650 doctors found time during the busy schedule of events to participate in the sample SESAP program, sponsored by the College's Committee on Continuing Education. The 15 item mini-program gave them a good insight into the workings of this popular program.



Although the scientific program for the 58th Annual Clinical Congress — San Francisco, Oct. 2-6, 1972 — has already been planned, certain details are still to be worked out. Here the ACS committee on Medical Motion Pictures works on a few.